## PART B -FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1459

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (\$71) 273-2885

OF Ear (\$72) 273-2885

for maintenance fee notifications.  CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the		
Address associated with Customer No. 22511				Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
				Certificate of Mailing or Transmission			
				1 hereby certify that this Fec(s) Transmittal is being deposited with the United			
				States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile			
				transmitted to the USPTO (571) 273-2885, on the date indicated below.			
				N/A		(Depositor's name)	
				N/A N/A		(Signature)	
APPLICATION NO.	FILING DATE	EIDST NAM	GED INIVENT		ATTORNEY DOCKET N	(Date)  O. CONFIRMATION NO.	
10/573,126	March 23, 2006	FIRST NAMED INVENT David Bastians		UK.	04465/023001	4908	
TITLE OF INVENTION					01105/025001	1700	
THE OF INVENTION. ARC LAWF INFROVEMENTS							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE		ATION FEE	TOTAL FEE(S) DUE	DATE DUE	
Patent	yes	\$755.00 ART UNIT		00.00 UBCLASS	\$1,055.00	November 22, 2008	
EXAMINER Le, Tung X		2821		291000	l		
Change of correspondence address or indication of "Fee 2. For printing on the patent from					list		
Address" (37 CFR 1.363). (1) the names of up to 3 registered patent 1 Osha Liang LLP							
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  Correspondence Address form PTO/SB/122) attached.  Correspondence Address form PTO/SB/122) attached.  Correspondence Address form PTO/SB/122 attached.							
"Fee Address" indication (or "Fee Address" Indication   a registered attorney or ag				agent) and the	names of		
form PTO/SB/47; Rev 03-02 or more recent) attached.  Use of a Customer Number is required.  up to 2 registered patent attorneys or agents. If no ame will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been filed							
for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.							
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Niteflux Pty Ltd Gilles Plains, Australia							
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual X Corporation or other private group entity Oovernment							
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
X Issue Fee A check in the amoun					s) is enclosed.		
x Publication Fee (No small entity discount permitted) x Payment by credit card.							
Advance Order # of Copies  X The Director is hereby authorized by charge the required fex(s), or credit any overpayment, to Deposit Account Number 50,0591							
6 Channa in Franks St.	ton (Com atotas in diseas	<u> </u>			30-0371		
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).							
The Director of the USPTO	is requested to apply the I	ssue Fee and Publication Fee	(if any) or to 1	e-apply any pre-	viously paid issue fee to the ap	oplication identified above.	
NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Party and Trademark Office.							
Authorized Signature					Date N	lovember 24, 2008	
Typed or printed name Jonathan P. Osha				Registration No.	33,986		